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## FEC FORM 3X

## REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

|      |   |               |                                   |                     |                            |                    | Office Use Only |                     |   |  |
|------|---|---------------|-----------------------------------|---------------------|----------------------------|--------------------|-----------------|---------------------|---|--|
| 1.   | NAME OF<br>COMMITTEE (in full)                            |               | MAILING LAB                       |                     | ample:If typiner the lines | ng, type           |                 |                     |   |  |
| l ,  | WYOMING BANKERS ASS                                       | OCIATION      | BANKPAC                           |                     | 1 1 1 1                    |                    |                 |                     | 1   |  |
| <br> |   |               |                                   |                     |                            |                    |                 |                     | 1   |  |
|      |   | 1 200 F       | 8TH AVE SUIT                      | F 201               |                            |                    |                 |                     |   |  |
| AD   | DRESS (number and street)                                 |               |                                   |                     |                            |                    |                 |                     |   |  |
|      | Check if different than previously reported. (ACC)        | CHEY          | ENNE                              |                     |                            |                    | WY              | 82001               |   |  |
| 2.   | FEC IDENTIFICATION NUM                                    | IBER 1        | ·                                 | CITY 🛋              |                            | 5                  | STATE A         | ZIPC                | ODE A                                       |  |
|      | C00423459   |               | 3                                 | . IS THIS<br>REPORT | . X                        | NEW (N) OR         | AI (A           | MENDED<br>()        |   |  |
| 4.   | TYPE OF REPORT (Choose One)                               | `´ R          | lonthly<br>eport                  | Feb 20 (M2          | )                          | May 20 (M5)        | Aug             | g 20 (M8)           | Nov 20 (M11)<br>(Non-Election<br>Year Only) |  |
|      | (a) Quarterly Reports:                                    |               | ue On:                            | Mar 20 (M3          | )                          | Jun 20 (M6)        | H               | 20 (M9)             | Dec 20 (M12)<br>(Non-Election<br>Year Only) |  |
|      | April 15<br>Quarterly Report(Q1                           | )1) —         |                                   | Apr 20 (M4)         | )                          | Jul 20 (M7)        | Oct             | 20 (M10)            | Jan 31 (YE)                                 |  |
|      | July 15   | (c)           | ) 12-Day<br><b>PRE</b> -Electior  |                     | Primary (12                | 2P)                | General         | (12G)               | Runoff (12R)                                |  |
|      | Quarterly Report(Q  | ,             | Report for the                    |                     | Convention (12C)           |                    | Special (12G)   |                     |   |  |
|      | Quarterly Report(C<br>January 31<br>Quarterly Report(Y    |               | E                                 | ection on           |                            |                    |                 | in th<br>Stat       |   |  |
|      | July 31 Mid-Year<br>Report(Non-electio<br>Year Only) (MY) | n (d          | ) 30-Day<br><b>Post</b> -Election | on D                | General (30G)              |                    |                 |                     | Special (30S)                               |  |
|      | Termination Report  | t             | Report for the                    |                     | General (oc                | , ( )              | Tranon (c       | 7011)               | opeoidi (000)                               |  |
|      | (TER)   |               | Е                                 | ection on           |                            |                    | -               | in th<br>State      |   |  |
| 5.   | Covering Period 0 1                                       | 1 0           | 1 2009                            |                     | through                    | 0 6                | 30              | 2009                |   |  |
| l ce | ertify that I have examined this                          | Report and    | to the best of m                  | y knowledge         | and belief it i            | is true, correct a | and complete.   |                     |   |  |
| Тур  | oe or Print Name of Treasurer                             | David         | Johnson                           |                     |                            |                    |                 |                     |   |  |
| Sig  | nature of Treasurer Electro                               | nically Filed | d by David Jol                    | nnson               |                            | D                  | ate 07          | 0.8                 | 2009  |  |
| NO   | TE : Submission of false, erro                            | neous, or ir  | ncomplete inform                  | ation may s         | ubject the per             | rson signing this  | s Report to the | penalties of 2      | U.S.C 437g.                                 |  |
|      | Office<br>Use<br>Only                                     |               |                                   |                     |                            |                    |                 | FEC FO<br>(Rev. 12/ |   |  |
| гга  | SANIOSE   |               |                                   |                     |                            | •                  | •               | •                   |   |  |